



AMERICA'S POVERTY FIGHTING NETWORK

Community Action Partnership
of San Bernardino County

696 S. Tippecanoe Avenue
San Bernardino, CA 92415-0610
www.sbcounty.gov/capsbc

The Promise of Community Action

Community Action changes people's lives, embodies the spirit of hope,
improves communities, and makes America a better place to live.
We care about the entire community, and we are dedicated to helping people
help themselves and each other.

HEAP ASSISTANCE PROGRAM FOR 2008 WOOD /OIL/PROPANE

To qualify for this program, Wood **MUST BE** your **MAIN** source of heating or you must live in **rural** areas of the County with **propane** as your **main source of heating**. If you have natural gas, **you are not eligible** for this program. However, families in the **Mountain Communities** are **EXEMPT** due to extreme weather conditions and high fuel bills.

Eligible households are assisted once every year. Maximum amount is \$240 for a cord of wood or up to \$350 for propane. Clients are responsible for charges in excess of this amount. Services are delivered after payment is received by the utility/wood company. **This amount does not include propane tank rental charges, taxes.**

1) An Estimated statement must be on letterhead from the wood or propane company and must include:

- Applicants name, address, city, zip code, and also mailing address if applicable.
- Account number
- Price of wood (cord) or propane per gallon.
- Number of months a cord of wood or propane fills will last (at the time of applying).

2) CURRENT / ENTIRE copy of utility bills: GAS AND ELECTRIC

- **BILLS MUST BE COMPLETE (No assistance can be provided without actual utility bills showing usage).**
- **FINAL CALL OR SHUT OFF NOTICE** is necessary, but **DO NOT** take the place of the actual Gas and Electric bills.
- **BILLS MUST BE FOR A MINIMUM OF 22 DAYS OF SERVICE.**
- Rental agreement or mortgage payment book for **CURRENT** address showing your name and proof of residency. **NO RENT RECEIPTS**

3) ACCEPTABLE Identification:

- **CALIFORNIA PICTURE I.D.** With **CURRENT** address A **MUST**.
Current printouts from the DMV will be accepted showing current address.
No brown change of address cards from the DMV will be accepted.
- **SOCIAL SECURITY CARD A MUST.**

4) CURRENT proof of income:

- TANF (AFDC), General Relief for the **CURRENT MONTH**.
- SSI/SS monthly benefits for **CURRENT** year 2008 proof of income (award letter or bank statement showing amount (s) deposited. **NO 1099 forms for prior year 2007 SS/SSI income.**
- **WAGES** (check stubs for prior **30 day PAY PERIODS**).
- Need verification of income for all adults 18 yrs and older in the household. **(If he/she is not working they must apply for unemployment providing us with the approval/denial letter or copy of online application and confirmation number).**
- Income contributions/cash payments should include date, name, address of person giving contributions.

5) CHILD/SPOUSE/INDIVIDUAL SUPPORT

- **CURRENT MONTH** print out (showing prior 30 days monies issued) from the District Attorney's office.
- **CURRENT** notice of action showing support.
- **SELF-CERTIFIED** signed and dated statement from person providing support, including his/her addresses and telephone number.

Energy, Education, and Environmental Services (909) 723-1620 Fax (909) 723-1629

Family Development Program (909) 723-1560 Fax (909) 723-1569

CAPSBC Food Bank (909) 723-1580 Inland Empire Individual Development Accounts Program (909) 723-1570

Administration (909) 723-1510 Fax (909) 723-1509